

COUNTY OF LOS ANGELES
DEPARTMENT OF PUBLIC WORKS
BUILDING AND SAFETY / LAND DEVELOPMENT

SAN GABRIEL VALLEY
125 BALDWIN
ARCADIA CA 91007
PHONE: (626) 574-0941 EXT:

0500

BUILDING PERMIT
RESIDENTIAL ADD
BL 0500 0404280006

LEGAL ID:	LT: 6	BL: .001		
ASSESSOR INFORMATION NUMBER:	5791-027-033			
TENANT:				
OWNER:	HSU, LAURA 809 LOVEJOY AV ARCAD 910065424	TEL. NO:	(626) 378-2979-	
APPLICANT:	SAME AS OWNER	TEL. NO:		
CONTRACTOR:	SAME AS OWNER	TEL. NO:		
ARCHITECT OR ENGINEER:		TEL. NO:		
MAP NO: SEWER MAP BOOK:	PAGE:	FIRE ZONE:	CMP:	
153-281		3	01	
NO. OF FAMILIES:	DWELLING UNITS:	APT/COND:	STAT CLASS:	
	NO		21	
AIR QUALITY:	SCHOOL WITHIN 1000 FEET	HAZARDOUS MATERIALS		
REQUIRED SET BACK:	YARD:	HWY:	TOTAL SETBACK FROM	EXIST
FRONT PL-	20	0	PROP LINE:	WIDTH:
SIDE PL-	5	0	5	44
				0
REPORT ID: DPR261 ROUTE TO: BS0500				
STRUCTURE: 201		NO. OF STORIES: 1	CONST TYPE: VN	NEW OCCUP GROUP: XX
GARAGE:				
OTHER:				
EXIST BLDG USE:		USE ZONE: R-A		
EXIST OCC GRP:				
BUDGS. NOW ON LOT:		VALUATION: 16,600		
FEE DESCRIPTION:		QUANTITY:	UOM:	AMOUNT:
AA BLDG PERMIT ISSUANCE		16600.00	VAL	22.00
AC STRONG MOTION RESID		1.66		1.66
AX BUILDING REVIEW FEE		16600.00	VAL	64.90
B2 PERMIT W/ENERGY		292.71		292.71
08 CERTIF OF OCCUPANCY		80.20		80.20
TOTAL FEES				461.47
BUILDING ADDRESS: 809 LOVEJOY AV ARCAD CA 910065424 NEAREST CROSS STREET: FOSS AVE. THOMAS PAGE: 597 GRID: F2 LOCALITY: ARCADIA				
ISSUED ON: 04/28/04		PROCESSED BY: DS		EXPIRES ON: 04/23/05
FINAL DATE: 9/10/04		FINAL BY: [Signature]		CODE:
DESCRIPTION OF WORK: EXTEND 1 EXIS. BDRM. & ADD 1 FULL BATHROOM - 201 SQ. FT.				
SPECIAL CONDITIONS: 8 zoning - OK 4-12-04 [Signature]				
APPROVALS		DATE	INSPECTOR SIGNATURE	
LOCATION AND SETBACKS		6-16-04	[Signature]	
SOILS ENGINEER APPROVAL				
FOUNDATION/TRENCH FORMS		6-16-04	[Signature]	
SLAB/UNDER FLOOR				
RAISED FLOOR FRAMING				
UNDERFLOOR INSULATION				
1ST LEVEL FLOOR SHEATH				
2ND LEVEL FLOOR SHEATH				
ROOF SHEATHING				
FIRE DEPT. FRAME INSPECT				
BLDG DEPT. FRAME INSPECT		7/29/04	[Signature]	
SHEAR PANELS				
INSULATION/WEATHER STRIP		8-4-04	[Signature]	
INTERIOR LATH/DRYWALL		8-16-04	[Signature]	
EXTERIOR LATH		8-16-04	[Signature]	
LOT DRAINAGE				
SMOKE DETECTION DEVICES				
FIRE DEPARTMENT APPROVAL				

LICENSED CONTRACTOR'S DECLARATION

I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.

License Class _____ Lic. No. _____

Contractor's Signature _____ Date _____

OWNER-BUILDER DECLARATION

I hereby affirm under penalty of perjury that I am exempt from the Contractors License Law for the following reason (Sec. 7031.5, Business and Professions Code): Any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractors License Law (Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code) or that he or she is exempt therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars (\$500).

☐ I am exempt under Sec. _____ B.S.P.C. for this reason: _____

[Electrical, Plumbing & Sewer Permits Only]

☐ I, as owner of the property, will do the work, and the structure is not intended or offered for sale (Sec. 7044, Business and Professions Code). The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or herself, provided that such improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the owner-builder will have the burden of proving that he or she did not build or improve for the purpose of sale.

[All Other Permits]

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Owner Signature _____

Date _____

WORKER'S COMPENSATION DECLARATION

I hereby affirm under penalty of perjury one of the following declarations:

☐ I have and will maintain a certificate of consent to self-insure for workers' compensation, as provided for by Section 3700 of the Labor Code, for the performance of the work for which the permit is issued.

☐ I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My worker's compensation insurance carrier and policy number are: _____

Carrier _____

Policy Number _____

☐ I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the worker's compensation laws of California, and agree that if I should become subject to the worker's compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

Applicant Signature _____

Date _____

WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLAWFUL, AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000), IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST, AND ATTORNEY'S FEES.

LOBBYIST ORDINANCE CERTIFICATION

[Complete this section for permits in unincorporated Los Angeles County only]

This is to certify that I, as permit applicant, am familiar with the requirements of Los Angeles County Code Chapter 2, 160 et seq., (relating to the Los Angeles County Lobbyist Ordinance) and that all persons acting on behalf of myself compiled and will continue to comply therewith through the application process.

Applicant (Print Name) _____

Applicant Signature _____

Company Name (if employed by an entity/agency) _____ Date _____

JOB ADDRESS _____
LOCALITY _____

HAZARDOUS MATERIAL DECLARATION

Will the applicant or future building occupant handle a hazardous material or a mixture containing a hazardous material equal to or greater than the amount specified on the hazardous materials information guide?

Yes ☐ No ☐

Will the intended use of the building by the applicant or future building occupant require a permit for construction or modification from the South Coast Air Quality Management District (SCAQMD)? See permitting checklist for guidelines.

Yes ☐ No ☐

I have read the hazardous materials information guide and the SCAQMD permitting checklist. I understand my requirements under the Los Angeles County Code Title 2, Chapter 220 Sections 220.100 through 220.141 concerning hazardous material reporting and for obtaining a permit from the SCAQMD.

ASBESTOS NOTIFICATION

☐ Notification letter sent to SCAQMD or EPA

☐ I declare that notification of asbestos removal is not applicable to addressed project.

CONSTRUCTION LENDING AGENCY

I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, CMC).

Lender's Name _____

Lender's Address _____

Signature

I certify that I have read this application and state under the penalty of perjury that the above information is correct. I agree to comply with all City and County ordinances and State laws relating to building construction, and hereby authorize representatives of this County to enter upon the above-mentioned property for inspection purposes.

Applicant or Agent Signature _____ Date _____

0500

ELECTRICAL PERMIT
EL 0500 0404280001

LEGAL ID:	TR: 26280	LT: 6	BL: .001
ASSESSOR INFORMATION NUMBER: 5791-027-033			
TENANT:			
OWNER:	TEL. NO:		
HSU, LAURA	(626) 378-2979-		
809 LOVEJOY AV			
ARCD 910065424			
APPLICANT:			
TEL. NO:			
SAME AS OWNER			
CONTRACTOR:			
TEL. NO:			
SAME AS OWNER			
LIC. NO			
ARCHITECT OR ENGINEER:			
TEL. NO:			
LIC. NO:			

FEE DESCRIPTION:		QUANTITY:	UOM:	AMOUNT:
A1 PERMIT ISSUANCE FEE		8.00	OUT	22.00
G1 OUTLETS-LGT, SW, RECP		3.00	LGT	13.60
G2 LIGHTING FIXTURES		3.00	LGT	5.10
TOTAL FEES				40.70

REPORT ID: DPR265	ROUTE TO: BS0500
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BUILDING ADDRESS:	
809 LOVEJOY AV	
ARCD CA 910065424	
NEAREST CROSS STREET: POSS AVE.	
THOMAS PAGE: 597	GRID: F2
LOCALITY: ARCADIA	
ISSUED ON: 04/28/04	PROCESSED BY: DS
PLAN BY:	EXPIRES ON: 10/25/04
FINAL DATE	FINAL BY:
DESCRIPTION OF WORK	
ELECTRICAL FOR ADDITION.	
SPECIAL CONDITIONS:	
APPROVALS	DATE
TEMPORARY POWER POLE	
UNDERGROUND CONDUIT	
UPPER GROUND	
ROUGH CONDUIT	
ROUGH WIRING	
MAIN WATER LINE	
PLASTIC Y/N	METAL Y/N
UTILITY COMPANY NOTIFIED	

LICENSED CONTRACTOR'S DECLARATION

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Contractor's Signature _____ Date _____

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☐ I am exempt under Sec. _____ B. & P.C. for this reason: _____

(Electrical, Plumbing & Sewer Permits Only)

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[All Other Permits]

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Owner Signature Steve M. Chen Date 4-28-04

WORKER'S COMPENSATION DECLARATION

I hereby affirm under penalty of perjury one of the following declarations:

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☐ I have and will maintain worker's compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My worker's compensation insurance carrier and policy number are: _____

Carrier _____

Policy Number _____

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Applicant Signature _____ Date _____

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[Complete this section for permits in unincorporated Los Angeles County only]

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Applicant (Print Name) _____ Applicant Signature _____

Company Name (if employed by an entity/agency) _____ Date _____

JOB ADDRESS

LOCALITY

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Will the applicant or future building occupant handle a hazardous material or a mixture containing a hazardous material equal to or greater than the amount specified on the hazardous materials information guide?

Yes ☐ No ☐

Will the intended use of the building by the applicant or future building occupant require a permit for construction or modification from the South Coast Air Quality Management District (SCAQMD)? See permitting checklist for guidelines.

Yes ☐ No ☐

I have read the hazardous materials information guide and the SCAQMD permitting checklist. I understand my requirements under the Los Angeles County Code Title 2, Chapter 220 Sections 220.100 through 220.144 concerning hazardous material reporting and for obtaining a permit from the SCAQMD.

ASBESTOS NOTIFICATION

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CONSTRUCTION LENDING AGENCY

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Lender's Name _____

Lender's Address _____

goc

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Applicant or Agent Signature Steve M. Chen Date 4-28-04

COUNTY OF LOS ANGELES
DEPARTMENT OF PUBLIC WORKS
BUILDING AND SAFETY / LAND DEVELOPMENT

SAN GABRIEL VALLEY
125 BALDWIN
ARCADIA CA 91007
PHONE: (626) 574-0941 EXT:

0500

PLUMBING PERMIT
PL 0500 0404280001

LEGAL ID: TR: 26280 LT: 6 BL: .001

ASSESSOR INFORMATION NUMBER: 5791-027-033

TENANT:

OWNER: HSH, LAURA
809 LOVEJOY AV
ARCD 910065424
TEL. NO: (626) 378-2979-

APPLICANT: SAME AS OWNER
TEL. NO: -

CONTRACTOR: SAME AS OWNER
TEL. NO: -
LIC. NO: -

ARCHITECT OR ENGINEER: TEL. NO: -
LIC. NO: -

FEES PAID
QUANTITY: UOM: AMOUNT:

01 PERMIT ISSUANCE FEE	1.00	FIX	22.00
07 BATHTUBS/SHOWERS	1.00	FIX	12.90
25 LAVATORIES / SINKS	1.00	FIX	12.90
45 WATER CLOSET/URINAL	1.00	FIX	12.90
TOTAL FEES			60.70

BUILDING ADDRESS:

809 LOVEJOY AV
ARCD CA 910065424
NEAREST CROSS STREET: FOSS AVE.
THOMAS PAGE: 597 GRID: F2 LOCALITY: ARCADIA

ISSUED ON: 04/28/04 PROCESSED BY: DS PLAN BY: EXPIRES ON: 10/25/04

FINAL DATE 9/10/04 FINAL BY: INSPECTOR SIGNATURE

DESCRIPTION OF WORK

PLUMBING FOR BATHROOM ADDITION

SPECIAL CONDITIONS:

APPROVALS DATE INSPECTOR SIGNATURE

UNDER SLAB WORK

WATER SERVICE

PLASTIC Y/N METAL Y/N

ROUGH PLUMBING

GAS PIPING

GAS VENT

HOT WATER HEATER

PLUMBING FIXTURES

LAWN SPRINKLERS

GAS TEST

UTILITY COMPANY NOTIFIED

CMV

GRAY WATER SYSTEM

REPORT ID: DPR263

ROUTE TO: BS0500

LICENSED CONTRACTOR'S DECLARATION

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[All Other Permits]

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Owner Signature Sam M. Chubb Date 4-28-04

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Applicant (Print Name) _____ Applicant Signature Sam M. Chubb Date 4-28-04
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JOB ADDRESS
LOCALITY

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Applicant or Agent Signature Sam M. Chubb Date 4-28-04

COUNTY OF LOS ANGELES
DEPARTMENT OF PUBLIC WORKS
BUILDING AND SAFETY / LAND DEVELOPMENT

SAN GABRIEL VALLEY
125 BALDWIN
ARCADIA CA 91007
PHONE: (626) 574-0941 EXT:

0500
PLUMBING PERMIT
PL 0500 0405240028

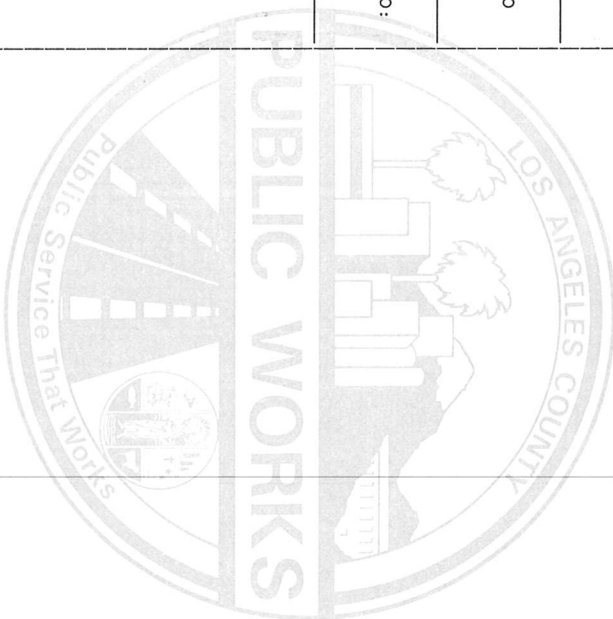
LEGAL ID:	TR: 26280	LT: 6	BL: .001
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APPLICANT:	SAME AS OWNER TEL. NO: -		
CONTRACTOR:	SAME AS OWNER TEL. NO: - L.I.C. NO		
ARCHITECT OR ENGINEER:	TEL. NO: - L.I.C. NO:		

FEE DESCRIPTION:	QUANTITY:	UOM:	FEES PAID	AMOUNT:
01 PERMIT ISSUANCE FEE				22.00
21 HOSE BIBB(S)	1.00	FIX		12.90
49 WATER TREATING EQUIP	1.00	SYS		12.90
63 WATER REPIPE, BR/FIX	11.00	FIX		59.40
64 WATER PIPNG <= 1 1/2	1.00	LIN		12.90
TOTAL FEES				120.10

BUILDING ADDRESS:		809 LOVEJOY AV ARCD CA 910065424 NEAREST CROSS STREET: FOSS AVE. THOMAS PAGE: 597 GRID: F2 LOCALITY: ARCADIA	
ISSUED ON:	PROCESSED BY:	PLAN BY:	EXPIRES ON:
05/24/04	DS		11/20/04
FINAL DATE	FINAL BY:	CODE:	
	9/10/04		
DESCRIPTION OF WORK REPIPE TO 1 1/2" FIX, RPL. WAT. SVC., 1 HOSE BIBB, INSTL. WATR. SOFTNR.			
SPECIAL CONDITIONS:			
APPROVALS	DATE	INSPECTOR SIGNATURE	
UNDER SLAB WORK			
WATER SERVICE			
PLASTIC Y/N METAL Y/N			
ROUGH PLUMBING			
GAS PIPING			
GAS VENT			
HOT WATER HEATER			
PLUMBING FIXTURES			
LAWN SPRINKLERS			
GAS TEST			
UTILITY COMPANY NOTIFIED			
CIV			
GRAY WATER SYSTEM			

REPORT ID: DPR263

ROUTE TO: BS0500



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Owner Signature _____

Date _____

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Carrier _____

Policy Number _____

☐ I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the worker's compensation laws of California, and agree that if I should become subject to the worker's compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

Applicant Signature _____

Date _____

WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLAWFUL, AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000), IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST, AND ATTORNEY'S FEES.

LOBBYIST ORDINANCE CERTIFICATION

[Complete this section for permits in unincorporated Los Angeles County only]

This is to certify that I, as permit applicant, am familiar with the requirements of Los Angeles County Code Chapter 2, 160 et seq., (relating to the Los Angeles County Lobbyist Ordinance) and that all persons acting on behalf of myself complied and will continue to comply therewith through the application process.

Applicant (Print Name) _____

Applicant Signature _____

Company Name (if employed by an entity/agency) _____

Date _____

JOB ADDRESS

LOCALITY

HAZARDOUS MATERIAL DECLARATION

Will the applicant or future building occupant handle a hazardous material or a mixture containing a hazardous material equal to or greater than the amount specified on the hazardous materials information guide?

Yes ☐ No ☐

Will the intended use of the building by the applicant or future building occupant require a permit for construction or modification from the South Coast Air Quality Management District (SCAQMD)? See permitting checklist for guidelines.

Yes ☐ No ☐

I have read the hazardous materials information guide and the SCAQMD permitting checklist, I understand my requirements under the Los Angeles County Code Title 2, Chapter 220 Sections 220.100 through 220.140 concerning hazardous material reporting and for obtaining a permit from the SCAQMD.

ASBESTOS NOTIFICATION

☐ Notification letter sent to SCAQMD or EPA

☐ I declare that notification of asbestos removal is not applicable to addressed project.

CONSTRUCTION LENDING AGENCY

I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, C.V.C.).

Lender's Name _____

Lender's Address _____



I certify that I have read this application and state under the penalty of perjury that the above information is correct. I agree to comply with all City and County ordinances and State laws relating to building construction, and hereby authorize representatives of this County to enter upon the above-mentioned property for inspection purposes.

Applicant or Agent Signature _____

Date _____



Del Lampe
By Del Lampe
Date Issued September 29, 2004